Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Veronica First name Diana Middle name Smith Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Veronica Diana Canmu FKA Veronica Diana Brooks	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4501	

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Debtor 1 Veronica Diana Smith

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
	doing business as names	Eddinistic Hamo(c)				
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		21850 NE 11th Ave. Lawtey, FL 32058				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Bradford				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Veronica Diana Smith				Case number (if known)				
Par	t 2: Tell the Court About Y	our Bankruptcy	Case					
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to me under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how order. If yo a pre-print	you may pay. Typi ur attorney is subm ed address.	ically, if you are paying the fee you nitting your payment on your beh	ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
				allments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individuals to Pay			
		I request to	nest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a not required to, waive your fee, and may do so only if your income is less than 150% of the official points to your family size and you are unable to pay the fee in installments). If you choose this option, you					
					cial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
		Distri	ot	When	Case number			
		Distri	et	When	Case number			
		Distri		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debto	r		Relationship to you			
		Distri	ct	When	Case number, if known			
		Debto	r		Relationship to you			
		Distri	ct	When	Case number, if known			
11.	Do you rent your residence?	□ No. Go t	o line 12.					
	residerice :	■ Yes. Has	your landlord obtain	ined an eviction judgment agains	st you and do you want to stay in your residence?			
			No. Go to line 1	12.				
			Yes. Fill out <i>Init</i> bankruptcy peti		Judgment Against You (Form 101A) and file it with this			

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Den	veronica Diana Si	111111			Case Humber (ii kilowi)		
Part	t 3: Report About Any Bu	sinassos	Vau Our	as a Solo Proprior	tor.		
Pan	Report About Any Bu	sinesses	Tou Own	as a Sole Proprie	101		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code		
	it to this petition.		Checi	the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline operation	s. If you in	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	No. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Пот	Depart if You Own or	Have An	, Uomondo	ua Dramarty av Am	V Dunnautiv That bloods Immediate Attention		
Pari	Do you own or have any		/ nazaruu	us Property of An	y Property That Needs Immediate Attention		
14.	property that poses or is	■ No.					
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
	O = 0				Number, Street, City, State & Zip Code		

Debtor 1 Veronica Diana Smith

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Veronica Diana Smith				Case number (if known)				
Par	t 6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?			consumer debts? Consumer debts are sonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or bus	siness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		□ Yes					
18.	How many Creditors do you estimate that you owe?	□ 1-49 ■ 50-99		□ 1,000-5,000 □ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000			
		□ 100-19 □ 200-99		□ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	□ \$0 - \$5	0,000 1 - \$100,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion			
	be worth?		01 - \$500,000	□ \$50,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$5	0,000 01 - \$100,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion			
	to be?	\$ 100,0	01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	\$10,000,000,001 - \$50 billion			
Par	t 7: Sign Below							
For	you	I have exa	mined this petition, and I de	eclare under penalty of perjury that the in	nformation provided is true and correct.			
				7, I am aware that I may proceed, if elig relief available under each chapter, and	gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.			
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request r	elief in accordance with the	chapter of title 11, United States Code,	specified in this petition.			
		bankruptc and 3571.	y case can result in fines up		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Veronica	n Diana Smith of Debtor 1	Signature of D	ebtor 2			
		Executed	October 2, 2017 MM / DD / YYYY	Executed on	MM / DD / YYYY			
	WIWI, BB/ TTTT							

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Debtor 1 Veronica Diana S	mith	Case number (if known)					
		- de dese de el la com					
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Stat for which the person is eligible. I also certify that I h	tes Code, and have e	explained the relief available under each chapter				
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certif schedules filed with the petition is incorrect.	y that I have no know	vledge after an inquiry that the information in the				
	/s/ Ramona S. Chaplin Signature of Attorney for Debtor	Date	October 2, 2017 MM / DD / YYYY				

Law Offices of Ramona S Chaplin, P.A.

Firm name

4040 Woodcock Drive, Suite 232 Jacksonville, FL 32207

Number, Street, City, State & ZIP Code

Contact phone 904-432-1221

Email address

rchaplinesq@gmail.com

0071621 Bar number & State

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Fill	in this information to identify	your case:			
Deb	otor 1 Veronica Di				
Deb	First Name	Middle Name	Last Name		
	use if, filing) First Name	Middle Name	Last Name		
Uni	ted States Bankruptcy Court for	the: MIDDLE DISTRICT OF	FLORIDA		
	ee number own)			_	c if this is an ded filing
	ficial Form 106Su				
			nd Certain Statistical Information		12/15
info	rmation. Fill out all of your sc	hedules first; then complete t	e are filing together, both are equally responsible for the information on this form. If you are filing amend to the box at the top of this page.		
Par	11: Summarize Your Asset	s			
				Your a	ssets of what you own
1.	Schedule A/B: Property (Off 1a. Copy line 55, Total real es	icial Form 106A/B) state, from Schedule A/B		\$	168,796.00
	1b. Copy line 62, Total persor	nal property, from Schedule A/B.		\$	10,745.78
	1c. Copy line 63, Total of all p	roperty on Schedule A/B		\$	179,541.78
Par	2: Summarize Your Liabil	ities			
					abilities
				Amoun	t you owe
2.		lave Claims Secured by Propert n Column A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	18,480.66
3.		Have Unsecured Claims (Offician Part 1 (priority unsecured clain	al Form 106E/F) ns) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from	n Part 2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	151,320.21
			Your total liabilities	\$	169,800.87
Par	Summarize Your Incom	ne and Expenses			
4.	Schedule I: Your Income (Officopy your combined monthly		e /	\$	1,198.00
5.	Schedule J: Your Expenses (Copy your monthly expenses	Official Form 106J) from line 22c of <i>Schedule J</i>		\$	1,399.36
Par	4: Answer These Questio	ns for Administrative and Stat	tistical Records		
6.		y under Chapters 7, 11, or 133 report on this part of the form. C	P Check this box and submit this form to the court with yo	ur other scl	nedules.
7.	Yes What kind of debt do you ha	ave?			
			debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not print the court with your other		eve nothing to report on this part of the form. Check this	s box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Veronica Diana Smith

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,111.86

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	64,007.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	64,007.00

Fill in this info	ormation to identify	vour case and th	ie filin	a:	1 1164 1070271	i age			
	•			y.					
Debtor 1	Veronica Dia		Name		Lost Namo				
Debtor 2	First Name	Middle	Name		Last Name				
(Spouse, if filing)	First Name	Middle	Name		Last Name				
United States	Bankruptcy Court for	the: MIDDLE D	ISTRIC	T OF FLORIDA					
0									
Case number								☐ Check if this is an amended filing	
Official F	<u>form 106A/E</u>	<u> </u>							
Schedu	ıle A/B: Pı	roperty						12/15	
In each category	, separately list and d	escribe items. List	an asse	t only once. If a	n asset fits in more than on	e category, lis	t the asset in	the category where you	
information. If m Answer every qu	nore space is needed, uestion.	attach a separate sl	heet to t	this form. On the	are filing together, both are top of any additional page nor Have an Interest In				
		g, <u>_</u> , c. c.							
1. Do you own o	or have any legal or ed	juitable interest in a	ny resid	dence, building,	land, or similar property?				
☐ No. Go to F	Part 2.								
Yes. When	re is the property?								
1.1			Wha	t is the property	? Check all that apply				
	SHLEIGH PARK D	R		Single-family h		Do not ded	uct secured cla	ims or exemptions. Put	
Street addre	ss, if available, or other des	scription	Duplex or multi-unit building the amount				unt of any secured claims on Schedule D:		
				Condominium	-	Creditors V	s Who Have Claims Secured by Property.		
				J	•				
				Manufactured of	or mobile home	Current va	lue of the	Current value of the	
Jacksor	nville FL	32244-0000] Land		entire pro		portion you own? \$168,796.00	
City	State	ZIP Code		Investment pro	perty	<u>\$10</u>	88,796.00		
						Describe t	he nature of y	our ownership interest	
			□ Wha		in the preparty?	(such as fee simple, tenancy by t			
				Debtor 1 only	in the property? Check one	a me estat	c), ii kilowii.		
Duval				-					
County					ebtor 2 only				
					the debtors and another	☐ Checl	c if this is com structions)	munity property	
			Othe	er information yo	u wish to add about this ite	(,		
				erty identificatio		,			
			Ow	ners: Debtor	and Former Spouse				
					-				
					om Part 1, including an			\$168,796.00	
pages you	i nave attached for	Part 1. Write that	numbe	er nere			=>	4.00,700,00	
Part 2: Descri	be Your Vehicles								

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debto	or 1 V	eronica Diana Smith		Case number (if known)	
3. Ca	rs, vans,	trucks, tractors, sport ut	tility vehicles, motorcycles		
	No				
■ \					
_	165				
3.1	Make:	Nissan	Who has an interest in the property? Check one		red claims or exemptions. Put
0	Model:	Altima	Debtor 1 only		secured claims on Schedule D: e Claims Secured by Property.
	Year:	2015	Debtor 2 only	Current value of the	, , ,
	Approxim	ate mileage: 65	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		ormation:	At least one of the debtors and another		
	Vehicle 1N4AL	:: 3AP1FC218129	Check if this is community property (see instructions)	\$9,389.	9,389.00
■ n	Yes	llar value of the portion	onal watercraft, fishing vessels, snowmobiles, motorcycl you own for all of your entries from Part 2, including Write that number here	any entries for	\$9,389.00
.pa	iges you	nave attached for Fart 2.	. Write that humber here		
Part 3	Descri	e Your Personal and Hous	ehold Items		
Do yo	ou own o	r have any legal or equit	able interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex			s, linens, china, kitchenware		
		children k	pooks, pillows, pot, pans, cutlery, micowave		\$175.00
Ex		ncluding cell phones, cam	dio, video, stereo, and digital equipment; computers, pri neras, media players, games	nters, scanners; music co	llections; electronic devices
		laptop, ce	ell phone		\$300.00
Ex		Antiques and figurines; pai other collections, memoral	intings, prints, or other artwork; books, pictures, or other bilia, collectibles	art objects; stamp, coin,	or baseball card collections;
Ex	:amples	musical instruments	cise, and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	nd kayaks; carpentry tools;
_E	rearms Examples No	Pistols, rifles, shotguns, a	ammunition, and related equipment		

De	ebtor 1	Veronica Dia	ana Smi	th	Case number	(if known)
	☐ Yes.	Describe				
11.	Clothe		athoo fur	a loothar agata	designer wear, shoes, accessories	
	□ No	oles. Everyday di	otnes, iui	s, leather coats,	designer wear, snoes, accessories	
	Yes.	Describe				
			used o	clothing for de	ebtor and minor children	\$450.00
12.	Jewelr		welry cos	stume iewelry e	ngagement rings, wedding rings, heirloom jewelry, watche	s gems gold silver
	□ No	oroo. Evoryday jo	y, oo.	starrio jourony, o	ngagomont inigo, watanig inigo, namooni jowany, watana	5, g5.116, g5.14, 5.11751
	Yes.	Describe				
			costu	me jewerly		\$100.00
13.		irm animals ples: Dogs, cats, l	birds, hor	ses		
	■ No	3 / /	,			
	☐ Yes.	Describe				
14.	Any ot	her personal an	d housel	nold items you	did not already list, including any health aids you did	not list
	■ No					
	⊔ Yes.	Give specific info	ormation.			
15		the dellar value	of all of v	our ontrine fro	m Part 3, including any entries for pages you have atta	achad
10						\$1,025.00
		scribe Your Finan				
Do	o you ow	vn or have any l	egal or e	quitable interes	st in any of the following?	Current value of the portion you own?
						Do not deduct secured claims or exemptions.
16.	Cash					
	_ `	bles: Money you l	nave in yo	our wallet, in you	ır home, in a safe deposit box, and on hand when you file	your petition
	■ No □ Yes					
47						
17.					accounts; certificates of deposit; shares in credit unions, b	rokerage houses, and other similar
	□ No	institutions.	ir you na	ve multiple acco	unts with the same institution, list each.	
	Yes				Institution name:	
			17.1.	Checking	Checking Account: USAA FEDERAL CHECKING BANK X3075-5	\$5.00
					Checking Account: USAA FEDERAL	
			17.2.	Checking	Checking BANK x1703-1	\$324.00
					Savings Account: USAA FEDERAL SA	VINGS
			17.3.	Savings	BANK	\$2.78
18.		, mutual funds, oles: Bond funds,			s n brokerage firms, money market accounts	
	■ No				• • • • • • • • • • • • • • • • • • •	
	☐ Yes			Institution or iss	uer name:	

page 3

De	ebtor 1	Veronica Diana Smith	Case number (if known)	
19.	Non-pu joint v		orated and unincorporated businesses, including an interest in	an LLC, partnership, and
		Give specific information about them	% of ownership:	
	Negotia Non-ne ■ No		stiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. insfer to someone by signing or delivering them.	
0.4	Dathan	Issuer name:		
21.		nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 4	03(b), thrift savings accounts, or other pension or profit-sharing plan	s
	☐ Yes.	List each account separately. Type of account:	Institution name:	
22.	Your sl Examp		that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies,	or others
	■ No □ Yes.		Institution name or individual:	
23.	Annuiti ■ No	es (A contract for a periodic payment of mone	ey to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.	26 U.S.0	s in an education IRA, in an account in a quec. §§ 530(b)(1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition progra	m.
	■ No □ Yes	Institution name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts, ■ No	equitable or future interests in property (o	ther than anything listed in line 1), and rights or powers exercis	able for your benefit
	☐ Yes.	Give specific information about them		
26.		 copyrights, trademarks, trade secrets, and les: Internet domain names, websites, procee 		
	☐ Yes.	Give specific information about them		
	Examp ■ No		es perative association holdings, liquor licenses, professional licenses	
		Give specific information about them		Owner to release of the
IVI	oney or _l	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref ■ No	unds owed to you		
		Give specific information about them, including	g whether you already filed the returns and the tax years	
	■ No		upport, child support, maintenance, divorce settlement, property sett	lement

Debto	r 1	Veronica Diana Smith	Case number (if known)	
	xamp	amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefits; unpaid loans you made to someone else	efits, sick pay, vacation pay, workers' compe	nsation, Social Security
_		Give specific information		
	xamp	sts in insurance policies oles: Health, disability, or life insurance; health savings account (I	HSA); credit, homeowner's, or renter's insural	nce
	Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If so	you a	terest in property that is due you from someone who has die are the beneficiary of a living trust, expect proceeds from a life in one has died.		eive property because
		Give specific information		
<i>E.</i>	xamp No	s against third parties, whether or not you have filed a lawsuitables: Accidents, employment disputes, insurance claims, or rights Describe each claim		
	No	contingent and unliquidated claims of every nature, including Describe each claim	g counterclaims of the debtor and rights to	o set off claims
	No	nancial assets you did not already list Give specific information		
		the dollar value of all of your entries from Part 4, including ar art 4. Write that number here		\$331.78
Part 5:	De	scribe Any Business-Related Property You Own or Have an Interest I	n. List any real estate in Part 1.	
37. Do	you o	own or have any legal or equitable interest in any business-related p	operty?	
		o to Part 6. Go to line 38.		
Ц 1	es. c	to the so.		
Part 6:		scribe Any Farm- and Commercial Fishing-Related Property You Own ou own or have an interest in farmland, list it in Part 1.	n or Have an Interest In.	
	No.	own or have any legal or equitable interest in any farm- or one of the Part 7. Go to line 47.	commercial fishing-related property?	
Part 7:		Describe All Property You Own or Have an Interest in That You Did	l Not List Above	
	xamp	I have other property of any kind you did not already list? bles: Season tickets, country club membership		
	Yes.	Give specific information		
54. /	Add t	the dollar value of all of your entries from Part 7. Write that n	umber here	\$0.00

Debt	or 1 Veronica Diana Smith			Case number (if known)	
Part	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$168,796.00
56.	Part 2: Total vehicles, line 5		\$9,389.00		
57.	Part 3: Total personal and household items, line 15		\$1,025.00		
58.	Part 4: Total financial assets, line 36		\$331.78		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$10,745.78	Copy personal property total	\$10,745.78
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$179,541.78

		Case 3:17-	bk-03533-PMG	Doc 1	Filed 10/02/17	Page	16 of 68	
Fill	in this informa	ation to identify your	case:					
Del	btor 1	Veronica Diana S	mith Middle Name		_ast Name			
	btor 2 buse if, filing)	First Name	Middle Name		_ast Name			
` `		cruptcy Court for the:	MIDDLE DISTRICT O					
	se number						☐ Check if this is amended filing	an
	ficial For		operty You	Claim	ı as Exempt			4/16
Be a	as complete and property you list	I accurate as possible. ed on <i>Schedule A/B: F</i> attach to this page as i	If two married people are Property (Official Form 10	e filing toge 6A/B) as y	ther, both are equally respons source, list the property	that you	supplying correct informatic claim as exempt. If more spa additional pages, write your	ace is
spe any fund exe	cific dollar amo applicable stat ds—may be un mption to a par	ount as exempt. Alter tutory limit. Some exe limited in dollar amou	natively, you may clain emptions—such as tho unt. However, if you cla	the full fa se for hea im an exe	ir market value of the pro th aids, rights to receive nption of 100% of fair ma	perty being certain being rket value	One way of doing so is to song exempted up to the amenefits, and tax-exempt reference under a law that limits the your exemption would be	ount of tirement e
Pa	rt 1: Identify	the Property You Cla	im as Exempt					
1.	Which set of e	exemptions are you cl	laiming? Check one onl	y, even if y	our spouse is filing with you	I.		
	■ You are claim	ming state and federal	nonbankruptcy exemption	ons. 11 U.	S.C. § 522(b)(3)			
	☐ You are claim	ming federal exemption	ns. 11 U.S.C. § 522(b)(2	2)				
2.	For any prope	rty you list on Sched	ule A/B that you claim a	as exempt	fill in the information be	low.		
		n of the property and line	e on Current value o		ount of the exemption you c	laim	Specific laws that allow exer	nption

Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Check only one box for each exemption.	
\$9,389.00		Fla. Stat. Ann. § 222.25(1)
	■ 100% of fair market value, up to any applicable statutory limit	
\$175.00	\$175.00	Fla. Stat. Ann. § 222.25(4)
	☐ 100% of fair market value, up to any applicable statutory limit	
\$300.00	\$300.00	Fla. Stat. Ann. § 222.25(4)
	☐ 100% of fair market value, up to any applicable statutory limit	
\$450.00	\$450.00	Fla. Stat. Ann. § 222.25(4)
	☐ 100% of fair market value, up to any applicable statutory limit	
\$100.00	\$100.00	Fla. Stat. Ann. § 222.25(4)
	100% of fair market value, up to any applicable statutory limit	
	\$175.00 \$300.00	\$9,389.00

Official Form 106C

De	ebtor 1 Veronica Diana Smith			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking: Checking Account: USA/ FEDERAL CHECKING BANK X3075-		-	\$5.00	Fla. Stat. Ann. § 222.25(4)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Checking Account: USA/ FEDERAL Checking BANK x1703-1	A \$324.00		\$324.00	Fla. Stat. Ann. § 222.25(4)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Savings: Savings Account: USAA FEDERAL SAVINGS BANK	\$2.78		\$2.78	Fla. Stat. Ann. § 222.25(4)
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and even the state of t	ry 3 years after that for ca	ases fi	·	,
	☐ Yes. Did you acquire the property cov☐ No	ered by the exemption wi	ithin 1	,215 days before you filed this case	?
	☐ Yes				

			_	
Fill in this information to identify yo	our case:			
Debtor 1 Veronica Diana	a Smith			
First Name	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name		-	
United States Bankruptcy Court for the				
			-	
Case number(if known)			_	if this is an ded filing
Official Form 106D				
	- Mha Llava Claima Casum	ad by Dranaut		4044
Schedule D: Creditor	s Who Have Claims Secur	ed by Propert	<u>y </u>	12/15
	. If two married people are filing together, both are t out, number the entries, and attach it to this form			
1. Do any creditors have claims secured	by your property?			
☐ No. Check this box and submit	this form to the court with your other schedules	. You have nothing else t	to report on this form.	
Yes. Fill in all of the information	n helow	· ·	·	
Part 1: List All Secured Claims	i bolow.			
		Column A	Column B	Column C
for each claim. If more than one creditor ha	s more than one secured claim, list the creditor separa as a particular claim, list the other creditors in Part 2. A stical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion
2.1 Usaa Fed Svng/nationst	Describe the property that secures the claim:	\$0.00	\$168,796.00	\$0.00
Creditor's Name	5596 ASHLEIGH PARK DR			
	Jacksonville, FL 32244 Duval			
	County Owners: Debtor and Former Spouse			
40750 Madage att Free	As of the date you file, the claim is: Check all that			
10750 Mcdermott Fwy San Antonio, TX 78288	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Number, Street, City, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 983	3		
Nissan Motor				
Acceptance Corp	Describe the property that secures the claim:	\$18,480.66	\$9,389.00	\$9,091.66
Creditor's Name	2015 Nissan Altima 65000 miles	1		
	Vehicle:			
	1N4AL3AP1FC218129			
PO BOX 660360	As of the date you file, the claim is: Check all that apply.			
DALLAS, TX 75266-0360	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the deht? Obselves	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.	accured		
Debtor 1 only	☐ An agreement you made (such as mortgage or car loan)	Secured		
Debtor 2 only	<u> </u>	.		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit)		
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				

Official Form 106D

Case 3:17-bk-03533-PMG Doc 1 Filed 10/02/17 Page 19 of 68

Debtor 1 Veronica Diana Smith					Case number (if know)	
	First Name	Middle Name	Last Name			
Date debt	was incurred	01/1/2015	Last 4 digits of account number	0001		
Add the dollar value of your entries in Column A on this page. Write that number					\$18,480.60	3
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:					\$18,480.60	3

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Case 3.11-	DK-03333-F W	G DOCT THE	u 10/02/11	rage 20 01 00	
Fill	in this inform	nation to identify your	case:				
Deb	otor 1	Veronica Diana S	mith				
		First Name	Middle Name	Last Name			
	otor 2 use if, filing)	First Name	Middle Name	Last Name			
Unit	ted States Bar	nkruptcy Court for the:	MIDDLE DISTRIC	T OF FLORIDA			
Cas (if kn	se number						theck if this is an mended filing
	icial Form hedule E		/ho Have Un	secured Claims			12/15
any e Sche Sche left. A name	executory control dule G: Execut dule D: Credito Attach the Con- e and case nun	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag nber (if known).	that could result in a ired Leases (Official ured by Property. If n ge. If you have no info	with PRIORITY claims and claim. Also list executory Form 106G). Do not include nore space is needed, copy rmation to report in a Part	contracts on School e any creditors wit y the Part you need	edule A/B: Property (Officially th partially secured claims d, fill it out, number the ent	al Form 106A/B) and on that are listed in tries in the boxes on the
		I of Your PRIORITY Ur					
1.	Do any credito	rs have priority unsecure	d claims against you	?			
	No. Go to Pa	art 2.					
	☐ Yes.						
Par	t 2: List Al	I of Your NONPRIORIT	Y Unsecured Clair	ns			
3.	Do any credito	rs have nonpriority unse	cured claims against	you?			
	☐ No. You hav	ve nothing to report in this p	art. Submit this form to	the court with your other sch	hedules.		
	Yes.						
	unsecured clain	n, list the creditor separatel	y for each claim. For ea	cal order of the creditor whath claim listed, identify whath Part 3.If you have more that	t type of claim it is. I	Do not list claims already inc	luded in Part 1. If more
							Total claim
4.1	Afni		Last	digits of account number	7865		\$34.95
	Nonpriority	Creditor's Name artin Luther King Dri		was the debt incurred?		_	
	Bloomir Number St	ngton, IL 61702 reet City State Zlp Code rred the debt? Check one.	As of	the date you file, the claim	າ is: Check all that ຄ	apply	
	■ Debtor		Пс	ontingent			
	☐ Debtor	•		nliquidated			
		1 and Debtor 2 only		sputed			
	_	t one of the debtors and an	_	of NONPRIORITY unsecure	ed claim:		
	☐ Check	if this claim is for a com	munity	udent loans			
	debt	m subject to offset?	□ oı	oligations arising out of a sep	paration agreement	or divorce that you did not	
	■ No	-		ebts to pension or profit-shar	ing plans, and other	r similar debts	
				ORIGINAL	CREDITOR:		
	☐ Yes		■ Ot	her. Specify COMCAS	Γ		

Debtor	1 Veronica Diana Smith	Case number (if know)				
4.2	Alled Interstate LLC	Last 4 digits of account number 892	\$704.00			
	Nonpriority Creditor's Name PO Box 965009 Orlando, El 23806	When was the debt incurred?				
	Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card				
4.3	Anytime Fitness	Last 4 digits of account number 3491	\$1.00			
	Nonpriority Creditor's Name ABC Financial Services PO Box 6800	When was the debt incurred?				
	North Little Rock, AR 72124					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.4	BANK OF AMERICA Nonpriority Creditor's Name	Last 4 digits of account number 8308	\$5,389.12			
	PO BOX 851001 DALLAS, TX 75285-1001	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				

Debtor	1 Veronica Diana Smith	Case number (if know)					
4.5	Bankamerica	Last 4 digits of account number	8308	\$5,519.00			
	Nonpriority Creditor's Name	_	Opened 03/15 Last Active				
	Po Box 982238 El Paso, TX 79998	When was the debt incurred?	4/04/17				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.6	Bradford Emergency Group LLC Nonpriority Creditor's Name	Last 4 digits of account number	5093	\$789.00			
	PO Box 731584 Dallas, TX 75373	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
4.7	Capital One Bank USA NA	Last 4 digits of account number	0016	\$4,591.65			
	Nonpriority Creditor's Name PO Box 71983 Charlotte, NC 28272	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	,	э энгэн энгэн эрргу				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not				
	<u> </u>	Debts to pension or profit-sharin	a plane, and other similar debte				
	■ No	·	y pians, and other similal debts				
	☐ Yes	Other. Specify credit card					

Debto	vr 1 Veronica Diana Smith	Case number (if know)	
4.8	Capital One Services, LLC	Last 4 digits of account number 0016	Unknown
	Nonpriority Creditor's Name PO BOX 30285	When was the debt incurred?	
	Salt Lake City, UT 84130		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	Li Tes	Other. Specify	
4.9	Cavalry SPV I, LLC Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	500 Summitt Lake Dr Ste 400 Valhalla, NY 10595	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Original Creditor: Rooms to Go	
4.1	CBCS	Last 4 digits of account number 9647	\$328.81
0	Nonpriority Creditor's Name	Last 4 digits of account number 964/	Ψ320.01
	PO Box 2589 Columbus, OH 43216	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

1 Veronica Diana Smith		Case number (if know)	
Citi	Last 4 digits of account number	8184	\$3,984.00
Nonpriority Creditor's Name	_	Opened 04/15 Last Active	
Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	7/01/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
CITIBANK NA	Last 4 digits of account number	8184	\$3,984.31
Nonpriority Creditor's Name PO BOX 183071 COLUMBUS, OH 43218-3071	When was the debt incurred?		
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
City of Savannah	Last 4 digits of account number	0178	\$49.00
Nonpriority Creditor's Name 100 E Bryan Street PO Box 2101	When was the debt incurred?		<u> </u>
Savannah, GA 31402 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	П о		
_	☐ Contingent☐ Unliquidated		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans		
debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	<u> </u>	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other Specify		

Veronica Diana Smith	Case number (if know)	
COMCAST	Last 4 digits of account number 7865	\$34.95
Nonpriority Creditor's Name 3570 COLLEGE DR	Last 4 digits of account number	ψ04.30
ORANGE PARK, FL 32065		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	Пол	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
COMCAST	Last 4 digits of account number 7865	\$134.95
Nonpriority Creditor's Name		***************************************
3570 COLLEGE DR	When was the debt incurred?	
ORANGE PARK, FL 32065 Number Street City State Zlp Code	As of the date you file the claim is: Check all that each	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Credit Control LLC	Last 4 digits of account number 9850	\$34.95
Nonpriority Creditor's Name 5757 Phanthom Dr Ste 330	When was the debt incurred?	
Hazelwood, MO 63042 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date year mo, the draining check an that apply	
■ Debtor 1 only	☐ Contingent	
□ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Пу	Original Creditor	
☐ Yes	Other. Specify Comcast	

r 1 Veronica Diana Smith		Case number (if know)	
DARKEMU G CANMU	Last 4 digits of account number	3024	\$1,500.00
Nonpriority Creditor's Name 5596 Ashleigh Park Drive Jacksonville, FL 32244	When was the debt incurred?	2/21/2017	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Dept Of Ed/navient	Last 4 digits of account number	0224	\$29,621.00
Nonpriority Creditor's Name			
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 02/12 Last Active 9/21/15	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	_		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	o plans, and other similar debts	
Yes	Other. Specify	g plane, and other cirrilar dobte	
Li res	Educationa		
	Laucationa		
Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0615	\$16,680.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 06/12 Last Active 9/21/15	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	• ,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other Specify		

Educational

1 Veronica Diana Smith		Case number (if know)	
Dept Of Ed/navient	Last 4 digits of account number	1223	\$7,815.00
Nonpriority Creditor's Name Po Box 9635 William Ports DA 18773	When was the debt incurred?	Opened 12/08 Last Active 9/21/15	
Wilkes Barre, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
	Educationa	ıl	
Dept Of Ed/navient	Last 4 digits of account number	1223	\$4,329.00
Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 12/08 Last Active 9/21/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
	Educationa	<u> </u>	
Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0721	\$3,465.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 07/08 Last Active 9/21/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		

Educational

Debto	r 1 Veronica Diana Smith		Case number (if know)	
4.2				
3	Dept Of Ed/navient	Last 4 digits of account number	0511	\$2,097.00
	Nonpriority Creditor's Name		Opened 05/12 Last Active	
	Po Box 9635	When was the debt incurred?	9/21/15	
	Wilkes Barre, PA 18773			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		Educationa		
1	DIDECTV IN CARE OF			
4.2	DIRECTV IN CARE OF BANKRUPTCY	Last 4 digits of account number	8291	\$678.10
	Nonpriority Creditor's Name			*****
	PO BOX 105261	When was the debt incurred?		
	Atlanta, GA 30348 Number Street City State Zlp Code	As of the date you file, the claim i	Charle all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim i	5. Спеск ан тасарру	
	Debtor 1 only	Пол		
	_	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	☐ Yes	Other. Specify		
4.2				
5	Diversified Consultants	Last 4 digits of account number	<u>8291</u>	\$822.55
	Nonpriority Creditor's Name PO Box 1391	When was the debt incurred?		
	Southgate, MI 48195			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		

1 Veronica Diana Smith	Case number (if know)	
JC Penney	Last 4 digits of account number 9221	\$758.5
Nonpriority Creditor's Name PO Box 960090	When was the debt incurred?	V
Orlando, FL 32896		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
JEA	Last 4 digits of account number 9647	\$328.
Nonpriority Creditor's Name 21 WEST CHRUCH ST	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the damins. Oneck an that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
JEA	Last 4 digits of account number 9647	\$328.
Nonpriority Creditor's Name 21 WEST CHRUCH ST	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

Debtor	1 Veronica Diana Smith	Case number (if know)	
4.2			
9	KWB Pathology Associates	Last 4 digits of account number 6529	\$199.00
	Nonpriority Creditor's Name PO Box 1259 Dept 15165 Oaks, PA 19456	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	LNLV	Last 4 digits of account number 4941	\$4,895.59
0	Nonpriority Creditor's Name		+ 1,000.00
	5757 Phantom Drive Ste 330	When was the debt incurred?	
	Hazelwood, MO 63042 Number Street City State Zlp Code	As of the date you file the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	□ Continued	
	_ ′	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Original Creditor: Capital One NA	
4.3			
1	LVNV Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	PO Box 510090	When was the debt incurred?	
	Livonia, MI 48151		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	·	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Ref ID: 663595422	

Case number (if know)	
Last 4 digits of account number 0016	\$4,895.00
When was the debt incurred? Opened 06/17	. ,
As of the date you file the claim is: Check all that apply	
As of the date you me, the dam is. Oneon an that apply	
☐ Contingent	
·	
•	
☐ Student loans	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Factoring Company Account Capital One N.A.	
Last 4 digits of account number	\$4,895.59
When was the debt incurred?	
— Assettle Later of Clark and State Of the United States	
As of the date you file, the claim is: Check all that apply	
O continued	
<u> </u>	
•	
<u></u>	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify	
Last 4 digits of account number 9351	\$1,255.65
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
_	
	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Factoring Company Account Capital One N.A. Last 4 digits of account number Other. Specify N.A. Last 4 digits of account number of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Last 4 digits of account number Other. Specify Last 4 digits of account number Other. Specify Last 5 digits of account number Other. Specify Last 6 digits of account number Student loans Other. Specify Last 7 digits of account number Other. Specify Last 8 digits of account number Student loans Other Specify Student loans Other Specify Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debt	or 1 Veronica Diana Smith	Case number (if know)	
4.3 5	Midland Funding	Last 4 digits of account number	\$0.00
J	Nonpriority Creditor's Name 2365 Northside Drive Suite 300	When was the debt incurred?	<u> </u>
	San Diego, CA 92018 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.3 6	Nissan Motor Acceptance Corporation	Last 4 digits of account number	\$20,080.37
	Nonpriority Creditor's Name PO BOX 660360 DALLAS, TX 75266-0360	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1.3	Quest Diagnostics	Last 4 digits of account number 8231	\$116.99
	Nonpriority Creditor's Name PO Box 740781 Cincinnati, OH 45274	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

1 Veronica Diana Smith	Case number (if know)	
Quest Diagnostics	Last 4 digits of account number 1532	\$293.59
Nonpriority Creditor's Name	Last 4 digits of account number 1532	Ψ293.33
PO Box 740781	When was the debt incurred?	
Cincinnati, OH 45274		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
in tes	Other. Specify	
Quest Diagnostics	Last 4 digits of account number 0596	\$47.59
Nonpriority Creditor's Name		
PO Box 740781	When was the debt incurred?	
Cincinnati, OH 45274 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is. Check all that apply	
■ Debtor 1 only	Пол	
_	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— No □ Yes		
_ 165	Other. Specify	
Quest Diagnostics	Last 4 digits of account number 6640	\$107.26
Nonpriority Creditor's Name		
PO Box 740781	When was the debt incurred?	
Cincinnati, OH 45274 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
— 103	Other, Specify	

Debtor	1 Veronica Diana Smith	Case number (if know)	
4.4	Quest Diagnostics	Last 4 digits of account number 9143	\$604.45
	Nonpriority Creditor's Name PO Box 740781	When was the debt incurred?	
	Cincinnati, OH 45274 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Quest Diagnostics	Last 4 digits of account number 1046	\$6.97
	Nonpriority Creditor's Name PO Box 740781	When was the debt incurred?	
	Cincinnati, OH 45274 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, and take year may and training of chook all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured Debt	
4.4	SecurCare Self Storage	Last 4 digits of account number 1895	\$82.00
	Nonpriority Creditor's Name 2000 Wells Road A Orange Park, FL 32073	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Debtor	1 Veronica Diana Smith	Case number (if know)		
4.4				
4.4	Sherman Origination III, LLC	Last 4 digits of account number	\$4,895.59	
	Nonpriority Creditor's Name	When was the debt incurred?		
	PO Box 10497 Greenville, SC 29603	When was the debt incurred?		
	Number Street City State Zlp Code			
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	\square Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Unsecured Debt		
4.4	Starke HMA LLC	Last 4 digits of account number 4692	\$220.00	
5	Nonpriority Creditor's Name	Last 4 digits of account number 4692	\$239.08	
	ATTN: 11758C	When was the debt incurred?		
	PO Box 14000			
	Belfast, ME 04915 Number Street City State Zlp Code	As of the date year file the plains in Observation What seek		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	Continued.		
		Contingent		
	Debtor 2 only	☐ Unliquidated ☐ Disputed		
	Debtor 1 and Debtor 2 only			
	At least one of the debtors and another			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Unsecured Debt		
4.4				
6	Starke HMA LLC	Last 4 digits of account number 4692	\$348.85	
	Nonpriority Creditor's Name ATTN: 11758C	When was the debt incurred?		
	PO Box 14000			
	Belfast, ME 04915			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	_			
	☐ Yes	Other. Specify Unsecured Debt		

Debtor	1 Veronica Diana Smith		Case number (if know)	
4.4	Starke HMA LLC		4692	\$0.00
7	Nonpriority Creditor's Name ATTN: 11758C PO Box 14000	Last 4 digits of account number When was the debt incurred?		\$0.00
	Belfast, ME 04915 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Unsecured		
4.4	Starke HMA LLC	Last 4 digits of account number	4692	\$548.85
	Nonpriority Creditor's Name ATTN: 11758C PO Box 14000	When was the debt incurred?		
	Relfast, ME 04915 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Unsecured		
4.4 9	Syncb/ashley Homestore Nonpriority Creditor's Name	Last 4 digits of account number	2464	\$0.00
	950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	Opened 8/28/15 Last Active 9/14/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other Specify Charge Acc		

ebtor 1 Veronica Diana Smith		Case number (if know)	
Syncb/jcp	Last 4 digits of account number	8922	\$0.00
Nonpriority Creditor's Name Po Box 965007 Orlando, FL 32896	When was the debt incurred?	Opened 08/14 Last Active 6/30/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
SYNCHRONY BANK	Last 4 digits of account number	8168	\$1,705.70
Nonpriority Creditor's Name PO Box 960061 ORLANDO, FL 32896-0061	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify ROOMS TO) GO CREDIT CARD	
Tmobile	Last 4 digits of account number		\$119.17
Nonpriority Creditor's Name PO Box 629025 El Dorado Hills, CA 95762	When was the debt incurred?		
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing		
Yes	Other. Specify Unsecured	Debt	

Debtor	1 Veronica Diana Smith	Case number (if know)	
4.5			
3	TMobile	Last 4 digits of account number	\$219.75
	Nonpriority Creditor's Name PO Box	When was the debt incurred?	
	Saint Louis, MO 63179		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured Debt	
4.5			
4	visa	Last 4 digits of account number 8922	\$850.34
	Nonpriority Creditor's Name JCPENNY CREDIT CARD	When was the debt incurred?	
	123ABC ADDRESS	Their was the dest modified:	
	Jacksonville, FL 32244		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured Debt	
4.5	Visa Signature	Last 4 digits of account number 8308	\$5.389.91
5	Nonpriority Creditor's Name	Last 4 digits of account number 8308	Ψ5,509.91
	BANK OF AMERICA	When was the debt incurred?	
	PO BOX 982234		
	DALLAS, TX 75285-1001 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	Debtor 1 only	Пол	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	□ 162	Other. Specify Unsecured Debt	

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Debtor	1 Veronica Diana Smith			Case number (if know)	
4.5 6	Visa Signature	Last 4 digits of account num	nber	8308	\$5,519.45
	Nonpriority Creditor's Name Bank of America PO Box 851001	When was the debt incurred	l ?		
	Dallas, TX 75285 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the c	laim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	cure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	sepa	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-s	sharir	ng plans, and other similar debts	
	Yes	Other. Specify			
Part 3:		•			
is tryi have	nis page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out	someone else, list the original credi nat you listed in Parts 1 or 2, list the	itor in	Parts 1 or 2, then list the collection agency	here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 die			
AFNI	MARTIN LUTHER KING DRIVE	Line 4.14 of (<i>Check one</i>):		Part 1: Creditors with Priority Unsecured Clai	
	MINGTON, IL 61702-3517			Part 2: Creditors with Nonpriority Unsecured	Claims
	, , , , , , , , , , , , , , , , , , , ,	Last 4 digits of account number		8301	
AFNI	nd Address	On which entry in Part 1 or Part 2 dir Line <u>4.15</u> of (<i>Check one</i>):		list the original creditor? I Part 1: Creditors with Priority Unsecured Clai	ms
FL		Last 4 digits of account number		Part 2: Creditors with Nonpriority Unsecured 8301	Claims
Name a	nd Address	On which entry in Part 1 or Part 2 die	d you	list the original creditor?	
	RAN FINANCIAL, LP	Line 4.12 of (<i>Check one</i>):		$oldsymbol{1}$ Part 1: Creditors with Priority Unsecured Clai	ms
_	OX 7222910 STON, TX 77272-2910			Part 2: Creditors with Nonpriority Unsecured	Claims
11000	110N, 1X 11212-2310	Last 4 digits of account number		9298	
	nd Address	On which entry in Part 1 or Part 2 die	•	•	
CALV	ERY PORTFOLIO	Line 4.51 of (<i>Check one</i>):	_	Part 1: Creditors with Priority Unsecured Clai	
		Last 4 digits of account number		Part 2: Creditors with Nonpriority Unsecured 4841	Claims
	nd Address	On which entry in Part 1 or Part 2 di		_	
MIDLA	AND CREDIT MANAGEMENT	Line 4.54 of (<i>Check one</i>):		Part 1: Creditors with Priority Unsecured Clai	
		Last 4 digits of account number		Part 2: Creditors with Nonpriority Unsecured 5396	Claims
	nd Address	On which entry in Part 1 or Part 2 die	d you	list the original creditor?	
_	FOLIO RECOVERY	Line 4.34 of (<i>Check one</i>):		f I Part 1: Creditors with Priority Unsecured Clai	
PO BO	CIATES DX 41067 FOLK, VA 23541			Part 2: Creditors with Nonpriority Unsecured	Claims
HOME	VEN 10 20011	Last 4 digits of account number		9351	
Name a	nd Address	On which entry in Part 1 or Part 2 die	d you	list the original creditor?	
SHER	MAN ORIGINATOR	Line 4.33 of (<i>Check one</i>):		Part 1: Creditors with Priority Unsecured Clai	ms
		Last 4 digits of account number		Part 2: Creditors with Nonpriority Unsecured 5422	Claims

Debtor 1	Veronica	Diana	Smith
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Case number (if know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ —	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	64,007.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
	-9.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	87,313.21
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	151,320.21

Fill in this infor	mation to identify your	case:		
Debtor 1	Veronica Diana S	mith		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	Oity		Olalo	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	Oity		Otate	Zii Oode	
	Name				
	Number	Street			<u> </u>
0.5	City		State	ZIP Code	
2.5					_
	Name				
	Number	Street			
	City		State	ZIP Code	

Official Form 106G

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Fill in this i	nformation to identify your	case:		-	
Debtor 1	Veronica Diana S				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	r) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	MIDDLE DISTRICT OF I	FLORIDA		
Case number (if known)	er				☐ Check if this is an amended filing
	Form 106H ule H: Your Cod	ebtors			12/15
people are f fill it out, an your name a	iling together, both are equ	ally responsible for supp boxes on the left. Attach Answer every question.	lying correct informati the Additional Page to	on. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
□ No					
■ Yes					
	in the last 8 years, have you , California, Idaho, Louisiana				rty states and territories include)
■ No. 0	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarant	tor or cosigner. Make s	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
5	ARKEMU Canmu 596 ASHLEIGH PARK DI acksonville, FL 32244	₹		■ Schedule D, □ Schedule E/F □ Schedule G Usaa Fed Svn	F, line

Official Form 106H Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Fill	in this information to identify your	case:								
Del	btor 1 Veronica D	iana Smith			_					
1 -	btor 2 puse, if filing)				_					
Uni	ited States Bankruptcy Court for the	e: MIDDLE DISTRICT O	F FLORIDA		_					
	se number nown)					□ Ai		ed filing ent sho	I wing postpetition ne following date:	
0	fficial Form 106I					M	M / DD/ `	YYYY		
S	chedule I: Your Inc	ome					, 22,			12/1
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and youch a separate sheet to this form. The describe Employment	u are married and not filir ur spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not inclu	spouse i de inforr	s liv natio	ing with on about	you, incl your sp	ude inf ouse. If	formation about f more space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor :	2 or no	n-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed				☐ Empl	•	ed	
	employers.	Occupation	, ,							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed th	nere?				_			
Pai	rt 2: Give Details About Mo	onthly Income								
	imate monthly income as of the ouse unless you are separated.	date you file this form. If y	ou have nothing to re	eport for	any l	line, write	\$0 in the	space.	. Include your no	n-filing
	ou or your non-filing spouse have mee space, attach a separate sheet to		embine the informatio	n for all e	emplo	oyers for t	that perso	on on th	ne lines below. If	you need
						For Deb	otor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$		0.00	\$	N/A	

Debt	or 1	Veronica Diana Smith	_	(Case i	number (<i>if kn</i>	iown)				
					For	Debtor 1			Debtor		
	Con	y line 4 here	4.		\$		0.00	nor \$	n-filing s	spouse N/A	
	СОР	y line 4 here	4.		Ψ_			Ψ_		IN/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	0	0.00	\$		N/A	<u>. </u>
	5b.	Mandatory contributions for retirement plans	5b	٠.	\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$_		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$ \$		0.00	\$_ \$		N/A N/A	_
	5g.	Union dues	5g		\$ -		0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	5h		\$		0.00			N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0	0.00	\$		N/A	_
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		s —		0.00	\$		N/A	_
8.		all other income regularly received:			· 			· —			=
٥.	8a.	Net income from rental property and from operating a business,									
		profession, or farm Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a	١.	\$	0	0.00	\$		N/A	
	8b.	Interest and dividends	8b	٠.	\$	0	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent									
		regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	8c		\$	1,198	3.00	\$		N/A	
	8d.	Unemployment compensation	8d	l.	\$	0	0.00	\$		N/A	_
	8e.	Social Security	8e	٠.	\$	0	0.00	\$_		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance									
		that you receive, such as food stamps (benefits under the Supplemental	•								
		Nutrition Assistance Program) or housing subsidies.			_	_					
	0~	Specify:	_ 8f.		\$ \$		0.00	\$_		N/A	
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g 8h		\$ -		0.00	* + *		N/A N/A	_
	OII.	Other monthly moonie. Specify.	_ 011	i.Ŧ -	Ф _	U	.00	Τ		IN/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	5	1,198	3.00	\$		N/A	A
			_	L			-			1	
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	1	1,198.00	+ \$		N/A	= \$	1,198.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.									
11.	othe Do r	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	depe		,	,		,		_	
	Spe	uny.							77.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	1,198.00
										Combi	ned
											ly income
13.	Do y	you expect an increase or decrease within the year after you file this form	?								
		No.									
		Yes Explain:									

	in this informs	tion to identify ye	2115 00001			l			
		tion to identify yo							
Deb	otor 1	Veronica Dia	ına Smith	1		Ch		f this is: amended filing	
Deb	otor 2							ū	ving postpetition chapter
(Spo	ouse, if filing)					_			the following date:
Unit	ed States Bankr	uptcy Court for the	: MIDDLI	E DISTRICT OF FLORIDA	<u> </u>		M	M / DD / YYYY	
Cas	e number								
(If k	nown)								
Of	fficial Fo	rm 106J							
S	chedule	J: Your	Exper	ises					12/1
Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta y questio	. If two married people and the control of the cont					
Par 1.	Is this a join	ibe Your House it case?	enoia						
	■ No. Go to								
			in a separ	ate household?					
	□ N	0							
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor	2.	
2.	Do you have	e dependents?	□ No						
	Do not list De Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?
	Do not state	tho							□ No
	dependents				son			2	■ Yes
									□ No
					daughter				■ Yes
					_				□ No
					Son			16	Yes
									□ No □ Yes
3.	Do vour exp	enses include	_	No			_		⊔ Yes
	expenses of	f people other to d your depende	han 🗆	No Yes					
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the	value of such	n assistance an		government assistance i cluded it on <i>Schedule I:</i> \				Your expe	nnaaa
(Of	ficial Form 10	61.)					_	Tour expe	enses
4.		r home owners		ses for your residence. I	nclude first mortgage	e 4.	\$_		100.00
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a.	\$		0.00
		rty, homeowner's	s, or renter	's insurance		4b.			0.00
				ıpkeep expenses		4c.			0.00
5.		owner's associat		dominium dues our residence, such as ho	ime equity loops	4d. 5	\$ \$		0.00
Ο.	Additional	norigage payint	onto for yo	on residence, such as 110	THE Equity Dalls	٥.	Ψ		0.00

ebte	or 1	Veronic	a Diana Smith	Case	num	ber (if known)	
i.	Utilit	ies:					
	6a.	Electricity	y, heat, natural gas		6a.	\$	40.00
	6b.	Water, se	ewer, garbage collection		6b.	\$	0.00
	6c.	Telephor	ne, cell phone, Internet, satellite, and cable services		6c.	\$	80.00
	6d.	Other. Sp	pecify:		6d.	\$	0.00
	Food	and hou	sekeeping supplies		7.	\$	375.00
	Child	dcare and	children's education costs		8.	\$	80.00
	Cloth	hing, laun	dry, and dry cleaning		9.	\$	20.00
0.	Pers	onal care	products and services		10.	\$	45.00
1.	Medi	ical and d	ental expenses		11.	\$	0.00
			1. Include gas, maintenance, bus or train fare.			· 	
			car payments.		12.	\$	60.00
3.	Ente	rtainment	, clubs, recreation, newspapers, magazines, and	books	13.	\$	55.00
4.	Char	ritable cor	tributions and religious donations		14.	\$	20.00
-		rance.					
			insurance deducted from your pay or included in line			_	
		Life insu			15a.		0.00
		Health in			15b.	*	0.00
		Vehicle in			15c.	·	134.05
			surance. Specify:		15d.	\$	0.00
			include taxes deducted from your pay or included in	lines 4 or 20.	40	•	2.00
	Spec	·	1		16.	\$	0.00
			lease payments: nents for Vehicle 1	,	17a.	¢	200.24
						·	390.31
			nents for Vehicle 2		17b. 17c.	·	0.00
		Other. Sp				·	0.00
		Other. Sp			17d.	>	0.00
			s of alimony, maintenance, and support that you n your pay on line 5, <i>Schedule I, Your Income</i> (Off		18.	\$	0.00
			ts you make to support others who do not live w			\$	0.00
	Spec		to you make to support stillors into us not into in	an you.	19.	Ψ	0.00
	•	,	perty expenses not included in lines 4 or 5 of this	form or on Schedule		ur Income.	
			es on other property		20a.		0.00
		Real esta			20b.		0.00
	20c.	Property	homeowner's, or renter's insurance	;	20c.	\$	0.00
			ance, repair, and upkeep expenses		20d.	·	0.00
			ner's association or condominium dues		20e.	·	0.00
		r: Specify:		•	21.	·	0.00
	0	or opcomy.	· -		۷	- Ψ	0.00
		•	monthly expenses				
			4 through 21.			\$	1,399.36
	22b.	Copy line	22 (monthly expenses for Debtor 2), if any, from Office	cial Form 106J-2		\$	
	22c. /	Add line 2	2a and 22b. The result is your monthly expenses.			\$	1,399.36
	٠.		and the second by a second				
		-	monthly net income.		nn -	Φ.	4 400 00
			e 12 (your combined monthly income) from Schedule		23a.	·	1,198.00
	23b.	Copy you	ur monthly expenses from line 22c above.	2	23b.	-\$	1,399.36
	22.	Cubtract	your monthly expenses from your monthly in a con-				
	∠3C.		your monthly expenses from your monthly income. It is your <i>monthly net income</i> .	:	23c.	\$	-201.36
		ine resu	icis your monuny neumbonne.	•	_00.	· .	
			an increase or decrease in your expenses within				
			you expect to finish paying for your car loan within the year	or do you expect your mortg	jage į	payment to increa	se or decrease because of
			e terms of your mortgage?				
	■ No	0.					
	□ Ye	es.	Explain here:				

Fill in this inform	ation to identify your	case:			
Debtor 1	Veronica Diana S	mith			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	MIDDLE DISTRICT O	F FLORIDA		
Case number(if known)					☐ Check if this is an amended filing
Official Form Declarati	-	ın Individua	ıl Debtor's So	hedules	12/15
f two married peo	ople are filing togethe	r, both are equally resp	onsible for supplying cor	rect information.	
obtaining money of years, or both. 18		n connection with a bar			tement, concealing property, or 100, or imprisonment for up to 20
ŭ		one who is NOT an atto	orney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes. Na	ame of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	y of perjury, I declare true and correct.	that I have read the su	mmary and schedules file	d with this declarati	ion and
X /s/ Vero	nica Diana Smith		X		
	a Diana Smith of Debtor 1		Signature of	Debtor 2	
Date O	ctober 2, 2017		Date		

							l	
Fil	l in this inf	ormation to identify y	our case:					
De	btor 1	Veronica Diar	na Smith					
		First Name	Mi	ddle Name	Last Name			
1	ebtor 2 ouse if, filing)	First Name	Mi	ddle Name	Last Name			
Un	ited States	Bankruptcy Court for the	ne: MIDDL	E DISTRICT OF FL	LORIDA			
1	ise number inown)						_	neck if this is an nended filing
		orm 107				_		
St	ateme	nt of Financia	II Affairs	for Individ	luals Filing for	Bankruptc	У	4/1
info	ormation. I		ed, attach a s		re filing together, both a his form. On the top of a			
Pa	rt 1: Giv	e Details About Your	Marital Statu	s and Where You	Lived Before			
1.	What is y	our current marital st	atus?					
	☐ Marr	ied						
	■ Not r	married						
2.	During th	ne last 3 years, have y	ou lived any	where other than v	vhere you live now?			
	_	, , , ,			,			
	□ No ■ Ves	List all of the places vo	ou lived in the	last 3 years. Do no	t include where you live n	OW		
			od iived iii tiie		,			
	Debtor 1	Prior Address:		Dates Debtor 1 lived there	Debtor 2 Prior	Address:		Dates Debtor 2 lived there
		shleigh Park Dr. nville, FL 32244		From-To: 8/2015 - 11/201	☐ Same as Debto	or 1		☐ Same as Debtor 1 From-To:
	4260 Jil Jackso	llian Dr nville, FL 32210		From-To: 11/2014 - 8/201	☐ Same as Debto	or 1		Same as Debtor 1 From-To:
3. stat					al equivalent in a commo			
	■ No							
	☐ Yes.	Make sure you fill out	Schedule H: \	Your Codebtors (Off	icial Form 106H).			
Pa	rt 2 Exp	olain the Sources of Y	our Income					
4.	Fill in the	total amount of income	you received	from all jobs and a	g a business during this Il businesses, including pa together, list it only once	art-time activities.	revious calend	dar years?
	□ No							
	Yes.	Fill in the details.						
			Debtor 1			Debtor 2		
				of income that apply.	Gross income (before deductions and exclusions)	Sources of in Check all that		Gross income (before deductions and exclusions)

Official Form 107

Debto	r 1 Veronica Diana Smith		Case	e number (if known)	
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	January 1 of current year until ate you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,767.88	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	st calendar year: ary 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$41,899.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	ne calendar year before that: ary 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$40,527.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
In ar w	id you receive any other income clude income regardless of wheth not other public benefit payments; innings. If you are filing a joint cas st each source and the gross income.	ner that income is taxable. Exa pensions; rental income; inter se and you have income that y	imples of other income are all est; dividends; money collect you received together, list it or	ed from lawsuits; royalties; an nly once under Debtor 1.	
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Child support from former spouse, James Hanks	\$3,850.00		
	Child Support from Ronald Brook	\$3,500.00		
	Child Support, Darkemu Canmu	\$1,211.00		
For last calendar year: (January 1 to December 31, 2016)	Child support from former spouse, James Hanks	\$4,620.00		
	Federal Tax Return	\$5,227.00		
	Child Support from Ronald Brook	\$4,200.00		
	Child Support,Darkemu Canmu	\$1,400.00		

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Debto	or 1	Ver	onica D	iana Smith		Cas	se number (if known)		
	_								
					Debtor 1		Debtor 2		
					Sources of income	Gross income from	Sources of in		Gross income
					Describe below.	each source	Describe below	٧.	(before deductions
						(before deductions and			and exclusions)
						exclusions)			
Ear #	an nal	and	ar voar h	oforo that:	Obild some set forces	,			
				efore that:	Child support from	\$4,620.00			
(Janu	iary 1	to L	ecembe	r 31, 2015)	former spouse,				
					James Hanks				
						40.054.00			
					Federal Tax Return	\$2,254.00			
					Child Support from	\$4,200.00			
					Ronald Brook				
Part 3	3: L	_ist	Certain F	ayments You	u Made Before You Filed for	Bankruptcy			
6. A	re eit	her	Debtor 1	's or Debtor 2	2's debts primarily consume	er debts?			
	J No	2	Neither I	Debtor 1 nor	Debtor 2 has primarily cons	umer debts. Consumer deb	ts are defined in 1	1 U.S.C. 8 10	1(8) as "incurred by an
_	,,				a personal, family, or househo		io aro aominoa iir r	. 0.0.0. 3 10	r(c) as mounted by an
			iiiaiviaaa	i pililialily loi	a personal, family, or floaders	ла рагрозо.			
			During th	a 90 days haf	ore you filed for bankruptcy, o	lid you hav any creditor a tot	al of \$6.425* or ma	are?	
						ild you pay arry creditor a total	ai Oi ψ0,425 Oi iii	ле:	
			□ No.	Go to line	7.				
			☐ Yes	List below	each creditor to whom you pa	id a total of \$6.425* or more	in one or more pa	vments and t	he total amount vou
					reditor. Do not include payme				
					e payments to an attorney for		gallorio, odori do o	ma capport c	and amnony. 7 100, 40
			* Subject		nt on 4/01/19 and every 3 year		or after the date	of adjustment	•
			Cubjec	i to adjustifici	it on 4701710 and every o year	is after that for cases filed of	or arter the date of	or adjustinoni	••
	Υe	es.	Debtor 1	or Debtor 2	or both have primarily cons	umer debts.			
					ore you filed for bankruptcy, o		al of \$600 or more	?	
			3			, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,		
			■ No.	Go to line	7.				
			☐ Yes	List below	each creditor to whom you pa	aid a total of \$600 or more an	d the total amount	t you paid tha	t creditor. Do not
			— 163		yments for domestic support				
					or this bankruptcy case.	obligations, such as chilu sup	port and aminorly.	Also, do Hot	include payments to an
				allorney ic	ir triis barikruptcy case.				
	Credit	or's	Name a	nd Address	Dates of paym	ent Total amount	Amount you	Was this	payment for
	J. Juil		manno a		Dates of payin	paid	still owe	mao amo j	paymont for in
						para	Juli Owe		
7 W	lithin	1	ar bofor	o you filed fo	r hankruntev, did vou make	a navment on a debt you o	wod anyono who	was an ins	idor?
					r bankruptcy, did you make				
					general partners; relatives o				
					r, person in control, or owner				
а	busin	ess	you oper	ate as a sole p	proprietor. 11 U.S.C. § 101. In	clude payments for domestic	support obligation	ns, such as ch	hild support and
а	limony	/.							
	No	<u> </u>							
_	_								
L	J Y€	es. L	ist all pay	ments to an i	nsider.				
	nside	r's I	Name and	d Address	Dates of paym	ent Total amount	Amount you	Reason fo	or this payment
			tamo am	a / (aa. 000	Dates of payin	paid	still owe	rtouoon re	or uno paymont
						puid	Still Offic		
e v	/ithin	1 v	ar hefor	e vou filed fo	r bankruptcy, did you make	any nayments or transfer	any property on a	eccount of a	debt that benefited an
	nsider		ai beioi	e you med to	i banki upicy, ala you make	any payments of transfer	any property on a	iccount or a	debt that beliefited an
			mente or	dehte augrar	nteed or cosigned by an inside	ar.			
11	iciuue	pay	mento u	i debio guarai	need or cosigned by an inside				
_	_								
	No	0							
] Ye	es. I	ist all nav	ments to an i	nsider				
			. ,					_	
1	nside	r's I	Name and	d Address	Dates of paym		Amount you		or this payment
						paid	still owe	Include cre	editor's name

Del	btor 1 Veronica Diana Smith		Case number	(if known)		
Par	rt 4: Identify Legal Actions, Repossession	se and Foroclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in a				
	NoYes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency	:	Status of th	e case
	DARKEMU G CANMU v. VERONICA CANMU 16-2016-DR-003024-FMXX-MA	Dissolution of Marriage	Duval County Courthou 501 W Adams Street Jacksonville, FL 32202	[☐ Pending☐ On appe☐ Conclud	eal
					Final Judg 2/21/2017	gment entered
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below ☐ No. Go to line 11. ☐ Yes. Fill in the information below.		erty repossessed, foreclosed	, garnishe	ed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
	Securcare Self Storage 2000 Wells Road A Orange Park, FL 32073	pans, and chairs,	children clothing, pots,	10/5/20)17	\$150.00
		☐ Property was reposs ☐ Property was foreclo ☐ Property was garnish	sed.			
		Property was attached	ed, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		cluding a bank or financial ins	titution, s	et off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date ac taken	tion was	Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possession of an a	issignee f	or the bene	efit of creditors, a
Par	List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift	ts with a total value of more th	nan \$600 _l	per person?	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates y the gifts	ou gave s	Value
	Person to Whom You Gave the Gift and Address:					

Case number (if known)

14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or	, ,	, , , , ,	ns with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Pai	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankro or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anyth	ning because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lot the amount that insurance has paid. Lot claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfer	rs				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No	preparir	ng a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.		Description and value of any man	a más s	Data navenant	A
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Ramona S. Chaplin, P.A. 4040 Woodcock Drive, Suite 232 Jacksonville, FL 32207 rchaplinlaw@gmail.com				3/24/2016-\$75 0.00 8/11/2017-\$50. 00	\$800.00
17.	Within 1 year before you filed for bankry promised to help you deal with your cree Do not include any payment or transfer that I No Yes. Fill in the details.	ditors o	r to make payments to your creditor		r transfer any prope	rty to anyone who
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have all No	ur busin rs made a	ess or financial affairs? as security (such as the granting of a se			
	Yes. Fill in the details.		Deparintion and value of	Deparity	any property	Data transfer
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		iny property or received or debts change	Date transfer was made

Debtor 1 Veronica Diana Smith

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Case number (if known)

	No Yes. Fill in the details.					
N	ame of trust	Description an	d value of the pr	roperty trar	sferred	Date Transfer was
art 8	List of Certain Financial Accounts, I	nstruments, Safe Depo	osit Boxes, and	Storage Un	its	
). W sc	ithin 1 year before you filed for bankrup old, moved, or transferred? clude checking, savings, money market buses, pension funds, cooperatives, ass	tcy, were any financial	accounts or ins	struments h	eld in your name, or for	
	•					
N	Yes. Fill in the details. Iame of Financial Institution and ddress (Number, Street, City, State and ZIP ode)	Last 4 digits of account number	Type of accinstrument	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
9	ISAA Management Invoice Company 800 Fredericksburg Road San Antonio, TX 78288	xxxx-3797	☐ Checking ☐ Savings ☐ Money M ☐ Brokerag	arket	8/11/2017	\$608.67
	o you now have, or did you have within ash, or other valuables?	l year before you filed	■ Other Round Rou		eposit box or other depo	ository for securities,
ca III		Who else had a	IRA for bankruptcy, access to it? ar, Street, City,	any safe de	eposit box or other depo	Do you still have it?
Ca	nsh, or other valuables? No Yes. Fill in the details. Iame of Financial Institution	Who else had a Address (Numbe State and ZIP Code	for bankruptcy, access to it? ar, Street, City,	any safe de	e the contents	Do you still have it?
Ca	No Yes. Fill in the details. Iame of Financial Institution (ddress (Number, Street, City, State and ZIP Code) ave you stored property in a storage uni	Who else had a Address (Numbe State and ZIP Code	for bankruptcy, access to it? ar, Street, City,	any safe de	e the contents	Do you still have it?
Ca N A 2. Ha	No Yes. Fill in the details. Iame of Financial Institution (ddress (Number, Street, City, State and ZIP Code) ave you stored property in a storage uni	Who else had a Address (Numbe State and ZIP Code	for bankruptcy, access to it? access to it? access to it? bur home within or had access ar, Street, City,	Describe	e the contents	Do you still have it?
Ca N A 2. Ha	No Yes. Fill in the details. Idame of Financial Institution Address (Number, Street, City, State and ZIP Code) Ave you stored property in a storage uni No Yes. Fill in the details. Idame of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Numbe State and ZIP Code) to r place other than you who else has do to it? Address (Numbe State and ZIP Code)	for bankruptcy, access to it? access to it? access to it? bur home within or had access ar, Street, City,	Describe	e the contents ore you filed for bankrup	Do you still have it? otcy?
NAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	No Yes. Fill in the details. Idame of Financial Institution Address (Number, Street, City, State and ZIP Code) Ave you stored property in a storage uni No Yes. Fill in the details. Idame of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Numbe State and ZIP Code) t or place other than yo Who else has o to it? Address (Numbe State and ZIP Code)	for bankruptcy, access to it? er, Street, City, our home within or had access er, Street, City,	Describe	e the contents ore you filed for bankrup e the contents	Do you still have it? Do you still have it?
NAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	No Yes. Fill in the details. Idame of Financial Institution Address (Number, Street, City, State and ZIP Code) ave you stored property in a storage uni No Yes. Fill in the details. Idame of Storage Facility Address (Number, Street, City, State and ZIP Code) Identify Property You Hold or Control by you hold or control any property that so	Who else had a Address (Numbe State and ZIP Code) t or place other than yo Who else has o to it? Address (Numbe State and ZIP Code)	for bankruptcy, access to it? er, Street, City, our home within or had access er, Street, City,	Describe	e the contents ore you filed for bankrup e the contents	Do you still have it? Do you still have it?
NA A A A A A A A A A A A A A A A A A A	No Yes. Fill in the details. Iame of Financial Institution Iddress (Number, Street, City, State and ZIP Code) In the details.	Who else had a Address (Numbe State and ZIP Code) t or place other than yo Who else has o to it? Address (Numbe State and ZIP Code)	for bankruptcy, access to it? access to it? ar, Street, City, bur home within or had access ar, Street, City, access to it? acce	Describe 1 year before Describe erty you bo	e the contents ore you filed for bankrup e the contents	Do you still have it? Do you still have it?

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

regulations controlling the cleanup of these substances, wastes, or material.

Debtor 1 Veronica Diana Smith

Debtor 1 Veronica Diana Smith

Case number (if known)

Mazardous material, politural, contaminant, or similar term.		to o	wn, operate, or utilize it, including dispo	sal sites	i.			
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No								
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Name of accountant or bookkeeper Name of accountant or bookkeeper Do not include Social Security number or I Dates business existed	Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.						
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Andress (Number, Street, City, State and	24.	1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not include Social Security number or I Dates business existed		_ `						
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Yes. Fill in the details.	25.	5. Have you notified any governmental unit of any release of hazardous material?						
Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or I Dates business existed		=						
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No Yes. Fill in the details. Case Title				Ad	dress (Number, Street, City, State	and		Date of notice
Yes. Fill in the details. Case Title	26.	Hav	e you been a party in any judicial or adn	ninistrati	ve proceeding under any er	nvironn	mental law? Include settlements a	nd orders.
Case Number Name Address (Number, Street, City, State and ZIP Code)		_						
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not include Social Security number or I Dates business existed				Na Ad	me Idress (Number, Street, City,	Nat	ture of the case	Status of the case
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all finan institutions, creditors, or other parties.	Par	t 11:	Give Details About Your Business or	Connecti	ions to Any Business			
□ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business? Include all finan institutions, creditors, or other parties.	27.	With	nin 4 years before you filed for bankrupt	cy, did y	ou own a business or have	any of	the following connections to any	business?
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financinstitutions, creditors, or other parties.			☐ A sole proprietor or self-employed in	n a trade	, profession, or other activit	ty, eith	er full-time or part-time	
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business? Include all finantinstitutions, creditors, or other parties.			☐ A member of a limited liability comp	any (LLC	c) or limited liability partners	ship (L	LP)	
□ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.			☐ A partner in a partnership					
□ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.			☐ An officer, director, or managing exc	ecutive o	of a corporation			
Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all finan institutions, creditors, or other parties.			_			on		
Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all finan institutions, creditors, or other parties.			No. None of the above applies. Go to F	Part 12.				
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not include Social Security number or I Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all finan institutions, creditors, or other parties.			Yes. Check all that apply above and fill	in the de	etails below for each busine	ess.		
(Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all finan institutions, creditors, or other parties.				Describ	e the nature of the busines	s		
institutions, creditors, or other parties.		(Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper						iumber of frin.
■ No	28.			cy, did y	ou give a financial statemer	nt to an	nyone about your business? Inclu	de all financial
			No					
Yes. Fill in the details below.			Yes. Fill in the details below.					
Name Address (Number, Street, City, State and ZIP Code)		Add	dress	Date Iss	sued			

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Debtor 1 Veronica Diana Smith		Case number (if known)
Part 12: Sign Below		
	naking a false statement, concealing p	nents, and I declare under penalty of perjury that the answers roperty, or obtaining money or property by fraud in connection up to 20 years, or both.
/s/ Veronica Diana Smith		
Veronica Diana Smith Signature of Debtor 1	Signature of Debtor	2
Date October 2, 2017	Date	
Did you attach additional pages to Your ■ No □ Yes	Statement of Financial Affairs for Indi	ividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone w ■ No	ho is not an attorney to help you fill ou	ut bankruptcy forms?
☐ Yes. Name of Person Attach th	e Bankruptcy Petition Preparer's Notice,	Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your ca	se:		
Debtor 1	Veronica Diana Smi			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	MIDDLE DISTRIC	T OF FLORIDA	
Case number				
(if known)				☐ Check if this is an amended filing
If you are an indi creditors have you have leas You must file this whiche on the fi If two married pe sign an	vidual filing under chapte e claims secured by your ed personal property and s form with the court with ver is earlier, unless the d form ople are filing together in d date the form.	er 7, you must fill property, or the lease has no in 30 days after y court extends the a joint case, bot		et for the meeting of creditors, ne creditors and lessors you list nformation. Both debtors must
Part 1: List Yo	our Creditors Who Have S	Secured Claims		
information be	low.		Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
Identify the cre	editor and the property that	is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's L	Isaa Fed Svng/nations	t	Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	.
Description of	5596 ASHLEIGH PAR	K DR	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	Jacksonville, FL 322		Reammation Agreement. □ Retain the property and [explain]:	
securing debt:	County Owners: Debtor and Spouse	Former		_
Creditor's N	issan Motor Acceptan	ce Corp	☐ Surrender the property.	□ No

Part 2: List Your Unexpired Personal Property Leases

1N4AL3AP1FC218129

2015 Nissan Altima 65000 miles

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and redeem it.

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Vehicle:

Will the lease be assumed?

Yes

Official Form 108

name:

property

Description of

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1	Veronica Diana Smith	Case number (if known)	
Lessor's Descripti Property:	on of leased		□ No □ Yes
Lessor's Descripti Property:	on of leased		□ No □ Yes
Lessor's Descripti Property:	on of leased		□ No □ Yes
Lessor's Descripti Property:	on of leased		□ No □ Yes
Lessor's Descripti Property:	on of leased		□ No □ Yes
Lessor's Descripti Property:	on of leased		□ No □ Yes
Lessor's Descripti Property:	on of leased		□ No □ Yes
Part 3:	Sign Below		
Under pe property	nalty of perjury, I declare that I have indicated my inte that is subject to an unexpired lease.	ention about any property of my estate that sec	cures a debt and any personal
Ver	Veronica Diana Smith ronica Diana Smith nature of Debtor 1	Signature of Debtor 2	
Date	October 2, 2017	Date	

Fill in this inf	formation to identify your case:					lirected in this form and	in Form
Debtor 1	Veronica Diana Smith		12	2A-1Sup	p:		
Debtor 2 (Spouse, if filing)				■ 1. Th	ere is no pres	umption of abuse	
United State	s Bankruptcy Court for the: Middle District of	Florida		ар	plies will be r	o determine if a presul nade under <i>Chapter 7</i> icial Form 122A-2).	
Case numbe	er			☐ 3. Th	e Means Test	does not apply now by service but it could a	
						ın amended filing	pry later.
Official	Form 122A - 1			_ 0110		ar amenaea ming	
	r 7 Statement of Your Cu	rrent Moi	nthly inc	ome	!		12/1
attach a separ case number (qualifying mili	te and accurate as possible. If two married people rate sheet to this form. Include the line number to vite known). If you believe that you are exempted frow tary service, complete and file Statement of Exemple Calculate Your Current Monthly Income	which the addition on a presumption otion from Presur	nal information a of abuse becau	applies. C ise you d	On the top of a on the one of a	ny additional pages, wri marily consumer debts o	te your name and or because of
_	s your marital and filing status? Check one or	nly.					
	married. Fill out Column A, lines 2-11.	of the other Continuous	A and D. Pass	0.44			
	ried and your spouse is filing with you. Fill o ried and your spouse is NOT filing with you.		,	2-11.			
	iving in the same household and are not lega	•	•	Jumns A	and R lines	2-11	
□ Li	iving separately or are legally separated. Fill penalty of perjury that you and your spouse are leving apart for reasons that do not include evadi	out Column A, li egally separated	nes 2-11; do no d under nonbar	ot fill out nkruptcy	Column B. By law that appli	checking this box, you	
101(10A). If the 6 month	average monthly income that you received from all For example, if you are filing on September 15, the 6-n s, add the income for all 6 months and divide the tota on the same rental property, put the income from that p	nonth period would I by 6. Fill in the re	l be March 1 thro sult. Do not inclu	ugh Augu: de any inc	st 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
_	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	175.02	\$	
	ny and maintenance payments. Do not include n B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from an and roo	ounts from any source which are regularly p or your dependents, including child support a unmarried partner, members of your househole ommates. Include regular contributions from a sp. Do not include payments you listed on line 3.	. Include regular d, your depende	r contributions nts, parents,	\$	936.84	\$	
5. Net inc	come from operating a business, profession,						
	receipts (before all deductions) ry and necessary operating expenses	\$ 0.00 -\$ 0.00	otor 1				
	nthly income from a business, profession, or fai	m \$ 0.00	Copy here ->	\$	0.00	\$	
6. Net inc	come from rental and other real property	Deb	otor 1				
Gross r	receipts (before all deductions)	\$0.00					
	ry and necessary operating expenses	-\$ 0.00		_		•	
Net mo	nthly income from rental or other real property	\$	Copy here ->		0.00	\$	
7. Interes	t, dividends, and royalties			\$	0.00	Ψ	

Official Form 122A-1

tor 1 Veronica Diana Smith			Case numbe	er (<i>if known</i>)			
			Column A Debtor 1		Column B Debtor 2 or non-filing s		
Unemployment compensation			\$	0.00	\$		
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a bene	fit unde	r				
For you \$	0.	00					
For you \$ For your spouse \$							
Pension or retirement income. Do not include any ambenefit under the Social Security Act.			\$	0.00	\$		
Income from all other sources not listed above. Specific Do not include any benefits received under the Social Screeived as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or paymer nanity, or internationa	nts I or					
·			\$	0.00	\$		
			\$	0.00	\$		
Total amounts from separate pages, if any.		+	\$	0.00	\$		
. Calculate your total current monthly income. Add lin each column. Then add the total for Column A to the tot		\$	1,111.86	+ \$ _		= \$	1,111.86
						Total	current mont
2: Determine Whether the Means Test Applies to	You					IIICOII	ie .
12a. Copy your total current monthly income from line 1	1		Сор	y line 11	here=>	\$	1,111.80
Multiply by 12 (the number of months in a year)						X	12
12b. The result is your annual income for this part of the	form				12b.	\$	13,342.32
Calculate the median family income that applies to y	ou. Follow these ste	os:					
Fill in the state in which you live.	FL						
Fill in the number of people in your boundhold	2						
Fill in the number of people in your household.							EE 244 00
Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of for this form. This list may also be available at the bankr	online using the link s	pecified	I in the separ	ate instruc	13. etions	\$	55,344.00
How do the lines compare?							
14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	the top of page 1, ch	neck bo	x 1, <i>There i</i> s	no presun	nption of abuse).	
14b. Line 12b is more than line 13. On the top or Go to Part 3 and fill out Form 122A-2.	page 1, check box 2	, The p	resumption o	f abuse is	determined by	Form 1	22A-2.
3: Sign Below							
By signing here, I declare under penalty of perjury	that the information o	n this s	tatement and	in any att	achments is tru	ue and	correct.
χ /s/ Veronica Diana Smith							
Veronica Diana Smith Signature of Debtor 1							
Date October 2, 2017 MM / DD / YYYY							

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **04/01/2017** to **09/30/2017**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Temporary Staffing

Income by Month:

6 Months Ago:	04/2017	\$0.00
5 Months Ago:	05/2017	\$0.00
4 Months Ago:	06/2017	\$0.00
3 Months Ago:	07/2017	\$1,050.12
2 Months Ago:	08/2017	\$0.00
Last Month:	09/2017	\$0.00
	Average per month:	\$175.02

Line 4 - Child support income (including foster care and disability)

Source of Income: Child support fr spouse, Ronald Brook Jr

Constant income of \$350.00 per month.

Line 4 - Child support income (including foster care and disability)

Source of Income: Child support frm spouse, Darkemu Canmu

Income by Month:

6 Months Ago:	04/2017	\$443.03
5 Months Ago:	05/2017	\$443.03
4 Months Ago:	06/2017	\$0.00
3 Months Ago:	07/2017	\$0.00
2 Months Ago:	08/2017	\$0.00
Last Month:	09/2017	\$325.00
	Average per month:	\$201.84

Line 4 - Child support income (including foster care and disability)

Source of Income: Child support from James E. Hankerson

Constant income of \$385.00 per month.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	' :	Liquidation
\$2	245	filing fee
9	\$75	administrative fee
+ 5	\$15	trustee surcharge
\$3	335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

In re	Veronica Diana Smith		Case No.	
		Debtor(s)	Chapter	7
	VERIF	ICATION OF CREDITOR	MATRIX	
Γhe ab	ove-named Debtor hereby verifies that	at the attached list of creditors is true and	correct to the best	of his/her knowledge.
Date:	October 2, 2017	/s/ Veronica Diana Smith		

Signature of Debtor

Veronica Diana Smith 21850 NE 11th Ave. Lawtey, FL 32058

Anytime Fitness ABC Financial Services PO Box 6800 North Little Rock, AR 72124 Citi Po Box 6241 Sioux Falls, SD 57117

Ramona S. Chaplin Law Offices of Ramona S Chaplin, P.A. PO BOX 851001 4040 Woodcock Drive, Suite 232 Jacksonville, FL 32207

BANK OF AMERICA DALLAS, TX 75285-1001 CITIBANK NA PO BOX 183071 COLUMBUS, OH 43218-3071

Ronald Brooks Jr. GΑ

Bankamerica Po Box 982238 El Paso, TX 79998 City of Savannah 100 E Bryan Street PO Box 2101 Savannah, GA 31402

Usaa Fed Svng/nationst 10750 Mcdermott Fwy San Antonio, TX 78288

Bradford Emergency Group LLC PO Box 731584 Dallas, TX 75373

COMCAST 3570 COLLEGE DR ORANGE PARK, FL 32065

Afni 1310 Martin Luther King Driv PO BOX Bloomington, IL 61702

CALVERY PORTFOLIO

Credit Control LLC 5757 Phanthom Dr Ste 330 Hazelwood, MO 63042

AFNI 1310 MARTIN LUTHER KING DRIVE BLOOMINGTON, IL 61702-3517

Capital One Bank USA NA PO Box 71983 Charlotte, NC 28272

DARKEMU Canmu 5596 ASHLEIGH PARK DR Jacksonville, FL 32244

AFNI FL

Capital One Services, LLC PO BOX 30285 Salt Lake City, UT 84130

DARKEMU G CANMU 5596 Ashleigh Park Drive Jacksonville, FL 32244

Alled Interstate LLC PO Box 965009 Orlando, FL 32896

Cavalry SPV I, LLC 500 Summitt Lake Dr Ste 400 Valhalla, NY 10595

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

ALLTRAN FINANCIAL, LP PO BOX 7222910 HOUSTON, TX 77272-2910 CBCS PO Box 2589 Columbus, OH 43216 DIRECTV IN CARE OF BANKRUP PO BOX 105261 Atlanta, GA 30348

Diversified Consultants MIDLAND CREDIT MANAGEMENT Starke HMA LLC ATTN: 11758C PO Box 1391 Southgate, MI 48195 PO Box 14000 Belfast, ME 04915 JC Penney Midland Funding Syncb/ashley Homestore PO Box 960090 2365 Northside Drive 950 Forrer Blvd Orlando, FL 32896 Suite 300 Kettering, OH 45420 San Diego, CA 92018 JEA Nissan Motor Acceptance Corp Syncb/jcp PO BOX 660360 21 WEST CHRUCH ST Po Box 965007 DALLAS, TX 75266-0360 Orlando, FL 32896 JACKSONVILLE, FL 32058-4454 KWB Pathology Associates Nissan Motor Acceptance Corporation SYNCHRONY BANK PO Box 1259 Dept 15165 PO BOX 660360 PO Box 960061 Oaks, PA 19456 DALLAS, TX 75266-0360 ORLANDO, FL 32896-0061 **LNLV** PORTFOLIO RECOVERY ASSOCIATES Tmobile 5757 Phantom Drive Ste 330 PO BOX 41067 PO Box 629025 NORFOLK, VA 23541 Hazelwood, MO 63042 El Dorado Hills, CA 95762 LVNV Funding LLC Quest Diagnostics **TMobile** PO Box 510090 PO Box 740781 PO Box Cincinnati, OH 45274 Livonia, MI 48151 Saint Louis, MO 63179 Lvnv Funding Llc SecurCare Self Storage visa Po Box 10497 2000 Wells Road A JCPENNY CREDIT CARD Greenville, SC 29603 Orange Park, FL 32073 123..ABC ADDRESS Jacksonville, FL 32244 Sherman Origination III, LLC Visa Signature Mastercard CAPITAL ONE BANK BANK OF AMERICA PO Box 10497 PO BOX 71083 Greenville, SC 29603 PO BOX 982234 CHARLOTTE, NC 28272 DALLAS, TX 75285-1001

Mastercard SYNCHRONY BANK/TOYS R US 123 ABC, NC 28272 SHERMAN ORIGINATOR

Visa Signature Bank of America PO Box 851001 Dallas, TX 75285 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

Veronica Diana Smith		Case No	·	
	Debtor(s)		7	
DISCLOSURE OF COMPE	ENSATION OF ATTO	ORNEY FOR I	DEBTOR(S)	
compensation paid to me within one year before the fil	ing of the petition in bankrupto	y, or agreed to be pa	id to me, for services rende	ered or to
For legal services, I have agreed to accept		\$	465.00	
			465.00	
Balance Due		\$	0.00	
335.00 of the filing fee has been paid.				
The source of the compensation paid to me was:				
■ Debtor □ Other (specify):				
The source of compensation to be paid to me is:				
■ Debtor □ Other (specify):				
I have not agreed to share the above-disclosed com-	pensation with any other person	on unless they are me	mbers and associates of m	y law firm.
				firm. A
In return for the above-disclosed fee, I have agreed to	render legal service for all aspe	ects of the bankruptcy	case, including:	
Preparation and filing of any petition, schedules, staRepresentation of the debtor at the meeting of credit	atement of affairs and plan whi	ch may be required;		otcy;
By agreement with the debtor(s), the above-disclosed f	ee does not include the followi	ng service:		
	CERTIFICATION			
	ny agreement or arrangement f	or payment to me for	representation of the debt	or(s) in
ctober 2, 2017	/s/ Ramona S. C	Chaplin		
<u> </u>	Ramona S. Cha Signature of Attor Law Offices of 4040 Woodcock Jacksonville, F 904-432-1221	plin ney Ramona S Chaplii c Drive, Suite 232 L 32207 Fax: 904-239-5569 mail.com		_
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2015 compensation paid to me within one year before the filling of the debtor(s) in contemplation. For legal services, I have agreed to accept. Prior to the filling of this statement I have received Balance Due. Balance Due. Balance Other (specify): The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation to get the agreement, together with a list of the number of the above-disclosed fee, I have agreed to an Analysis of the debtor's financial situation, and removed the provisions as needed. By agreement with the debtor(s), the above-disclosed fee agreement with the debtor(s) and the agreement agreement with the debtor(s) and the agreement agreem	Disclosure of compensation paid to me within one year before the filing of the petition in bankrupto be rendered on behalf of the debtor(s) in contemplation of or in connection with the before the filing of the petition in bankrupto be rendered on behalf of the debtor(s) in contemplation of or in connection with the befor legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due 335.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person copy of the agreement, together with a list of the names of the people sharing in the first three the above-disclosed fee, I have agreed to render legal service for all aspet. Analysis of the debtor's financial situation, and rendering advice to the debtor in the preparation and filing of any petition, schedules, statement of affairs and plan which are preparation of the debtor at the meeting of creditors and confirmation hearing. CERTIFICATION certify that the foregoing is a complete statement of any agreement or arrangement from the anakruptcy proceeding. CERTIFICATION certify that the foregoing is a complete statement of any agreement or arrangement from the debtor of the debtor of the debtor at the meeting of creditors and confirmation hearing. Js/ Ramona S. Chasignature of Autor Law Offices of 4040 Woodcool Jacksonville, Figo4-432-1221. If rehaplinesq@g	Debtor(s) Chapter DISCLOSURE OF COMPENSATION OF ATTORNEY FOR D Pursuant to 11 U. S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above nompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as I For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due \$ 335.00 of the filing fee has been paid. 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P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rends or rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept S 465.00 Prior to the filing of this statement I have received S 465.00 Balance Due S 0.00 Gride filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): Thave not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankrup. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; [Other provisions as needed] Sy agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION Certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor ankruptcy proceeding. CERTIFICATION Certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtankruptcy proceeding. Law Offices of Ramona S. Chaplin Signature of Automecy Law Offices